

Section 4. Additional Support Needs/Risk Assessment

Circle the appropriate number to indicate how much support is needed for each of the items below. Circle “To” &/or “For” if appropriate, to indicate the item is most important to or for the person. Complete ALL items.

	Section 4: Additional Supports/Risk Assessment	No Support Needed	Some Support Needed	Extensive Support Needed
Circle Most Important	Caretaker and Environmental Risks (for persons living at home)			
To / For	1. Incapacitated caretaker or loss of primary caretaker/natural supports - may become homeless, or environment is not appropriate for the person's medical conditions. Any current health and safety issue.	0	1	2
To / For	2. Housing issues related to family dwelling- may become homeless, or environment is not appropriate for the person's medical conditions.	0	1	2
To / For	3. History of neglect and/or abuse	0	1	2
To / For	4. Refusal of services by caretaker– caretaker is refusing to follow person-centered plan.	0	1	2
To / For	5. Criminal activity by caretaker e.g. criminal activity needs to be watched for due to past history that may not be safe for the person.	0	1	2
	Individual Behavioral Risks			
To / For	6. Housing related issues and/or homelessness (due to individual) – e.g. person may be homeless in the next 60 days.	0	1	2
To / For	7. Pregnancy and/or parenting issues- e.g. person is pregnant and/or has no parenting skills.	0	1	2
To / For	8. Criminal justice involvement & <u>convicted</u> requires controlled environment/24-hour supervision with rights restrictions in place	0	1	2
To / For	9. Criminal justice involved, but <u>NOT convicted</u> requires controlled environment/24-hour supervision with rights restrictions in place	0	1	2
To / For	10. Refusal of critical services or treatment- e.g. person refuses to go to the doctor for medication shots, or for therapy related to serious behavior.	0	1	2
	Health Risks			
To / For	11. Multiple unplanned hospitalizations- such as for impactions, COPD, or seizures.	0	1	2
To / For	12. Complex post hospital care needs <u>not</u> psychiatric issues -e.g. person broke leg and has continued PT, had surgical procedure that needs follow-up.	0	1	2
To / For	13. Significant change in medical status- now has seizures or physical condition is going down hill	0	1	2
To / For	14. Chronic eating disorders and/or including obesity- e.g. person has pica, dehydration issues, or will only eat pizza if left to purchase food.	0	1	2
To / For	15. Swallowing/choking/aspiration disorders e.g. person has tongue thrusts; eats too quickly; requires close supervision when eating at a restaurant, dysphasia.	0	1	2
To / For	16. Chronic medical problems (e.g. diabetes, congestive heart failure, COPD, asthma, constipation)	0	1	2
To / For	17. Complex medication issues due to multiple medications and side effects– Has 2 or more medications with side effects that need to be watched or specific medication like a blood thinner.	0	1	2
To / For	18. Uses poor judgment in unsafe situations which could cause severe health issues	0	1	2
To / For	19. Risk of falling, e.g. unsteady gait, wears helmet, seizures, or other issue that effects falling.	0	1	2

Notes for Section 4: _____
